FRETRANSMITTAL  FOR FY 2009  FOR FY 2009  FOR FY 2009  Application Number  Filing Date  First Named Inventor  Examiner Name  Berdichevsky, Miriam  Application Number  10/579,226  Filing Date  First Named Inventor  Examiner Name  Berdichevsky, Miriam  4132	FEE TRANSMITTAL				Complete if Known				
First Named Inventor BELLEWILLE, Philippe Examiner Name Bendichevsky, Miriam Poposition Examiner Name Bendichevsky, Miriam Poposition Examiner Name Bendichevsky, Miriam Poposition Examiner Name Bendicher School S				Application Number 10/579,226					
Examiner Name				Filing Date		May 12, 2006			
Examiner Name   Berdichevsky, Miriam   Anguetic Iclaims small entity status. See 37 CFR 1.27   All unit   4132				First Named Inventor BELLEVILLE,		E, Philippe			
METHOD OF PAYMENT (check all that apply)    Check	LI V4 ZOUS FOOT	1 2003		Examiner N	lame	Berdichevs	ky, Miriam		
METHOD OF PAYMENT (check all that apply)	Applicant claims small entity status. See 37 CFR 1.27			Art Unit		4132			
Check					Attorney Docket No. 10404.042.00				
Check				-					
Deposit Account   Deposit Account Number: 50-0911   Deposit Account Name: McKenna Long & Aldridge LLP	METHOD OF PAYMENT (check a	I that apply)							
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)    Charge fee(s) indicated below   Charge fee(s) indicated below, except for the filing fee	Check Credit Card Money Order Other (please identify):								
Charge fee(s) indicated below  Charge fee(s) indicated below, except for the filing fee  Charge any additional fee(s) or underpayments of fee(s)  Charge any additional fee(s) or underpayments of fee(s)  Credit any overpayments under 37 CFR 1.16 and 1.17  WARNINS: Information and formany become public. Credit card information should not be included on this form. Provide credit card information and subnortation on PTO-2038.  FEE CALCULATION  1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES SEARCH FEES SEACH FEES SEARCH FEES SEACH FEES SEARCH FEES SEARCH FEES SEARCH FEES SEARCH FEES SEARCH FE	Deposit Account  Deposit Account Number: 50-0911  Deposit Account Name: McKenna Long & Aldridge LLP								
Charge any additional fee(s) or underpayments of fee(s)	For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)								
WARNING: Information and inform any boscome public. Credit card information should not be included on this form. Provide credit card information should not be included on this form. Provide credit card information should not be included on this form. Provide credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.           FEE CALCULATION           Application Type         Fee (S)         Fee (S) <th c<="" td=""><td colspan="8">Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee</td></th>	<td colspan="8">Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee</td>	Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee							
FEE CALCULATION	under 37 CFR 1.16 and 1.17								
BASIC FILING, SEARCH, AND EXAMINATION FEES   FILING FEES   Small Entity   Small			card information shou	ld not be include	d on this form. Pro	ovide credit card			
FILING FEES   SEARCH FEES   Small Entity   Small	FEE CALCULATION								
Application Type	1. BASIC FILING, SEARCH, AN	D EXAMINATION FE	ES						
Application Type	Fit								
Design   220   110   100   50   140   70				ee (\$)		Fee (\$)	Fees Paid (\$)		
Plant   220   115   330   165   170   85									
Reissue   330   165   540   270   650   325	· · · · · ·								
Provisional   220   110   0   0   0   0   0   0   0   0									
Fee   S   Fee									
Each claim over 20 (including Reissues)  Each independent claim over 3 (including Reissues)  Multiple dependent claims  Total Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  HP = highest number of total claims paid for, if greater than 20.  Indep. Claims  Extra Claims  Fee (\$)  Fee (\$)  Fee Paid (\$)  HP = highest number of independent claims paid for, if greater than 3.  APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41 (a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  Extra Sheets  Number of each additional 50 or fraction thereof.  100 = 0 /50 = 0 (round up to a whole number) x  Fee(\$)  Fee(\$)  Fee Paid (\$)  Fee Paid (\$)  Fee Paid (\$)  Cound up to a whole number)  Request for Continued Examination (RCE)  Petition for Extension of Time  Registration No. (Attorney/Agent) 33,829 (202) 496-7500	2. EXCESS CLAIM FEES						Small Entity		
Each independent claim over 3 (including Reissues)  Multiple dependent claims  Total Claims  Extra Claims  Ox  \$52 = 0  Multiple Dependent Claims  Fee (\$) Fee Paid (\$)  HP = highest number of total claims paid for, if greater than 20.  Indep. Claims  - 3 or HP = 0 x \$220 = 0  HP = highest number of independent claims paid for, if greater than 3.  APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41 (a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  Extra Sheets  Number of each additional 50 or fraction thereof  - 100 = 0 /50 = 0 (round up to a whole number) x = 0  4. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity) discount)  Other (e.g., late filling surcharge): Request for Continued Examination (RCE)  Petition for Extension of Time  Registration No. (Attorney/Agent) 33,829  Registration No. (Cattorney/Agent) 33,829  Telephone (202) 496-7500	Fee Description								
Total Claims   Extra Claims   Fee (\$)   Fee Paid (\$)   Fee (\$)   Fee Paid (\$)    HP = highest number of total claims paid for, if greater than 20.  Indep. Claims   Extra Claims   Fee (\$)   Fee Paid (\$)    - 3 or HP =   0   x   \$220 =   0    HP = highest number of independent claims paid for, if greater than 3.  3. APPLICATION SIZE FEE   If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41 (a)(1)(G) and 37 CFR 1.16(s).  Total Sheets   Extra Sheets   Number of each additional 50 or fraction thereof   Fee(\$)   Fee Paid (\$)    - 100 =   0   / 50 =   0   (round up to a whole number) x   =   0    4. OTHER FEE(S)   Fees Paid (\$)    Non-English Specification, \$130 fee (no small entity discount)   Fees Paid (\$)    Petition for Extension of Time   1,110.00    Request for Continued Examination (RCE)   \$810.00    Petition for Extension of Time   1,110.00    Registration No. (Attorney/Agent) 33,829   Telephone (202) 496-7500	Each independent claim over 3 (including Reissues) 220 110								
- 20 or HP = 0 x \$552 = 0 Fee (\$) Fee Paid (\$)  HP = highest number of total claims paid for, if greater than 20.  Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)  - 3 or HP = 0 x \$220 = 0  HP = highest number of independent claims paid for, if greater than 3.  3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41 (a)(1)(G) and 37 CFR 1.16(s).  Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee(\$) Fee Paid (\$)  - 100 = 0 / 50 = 0 (round up to a whole number) x = 0.  4. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity discount)  Other (e.g., late filing surcharge): Request for Continued Examination (RCE) \$810.00  Petition for Extension of Time 1,110.00  Registration No. (Attorney/Agent) 33,829 (202) 496-7500						Multiple D			
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Telephone  Telephone  Telephone  Signature  - 3 or HP =	•	_ · · · · · · -		I (\$)					
3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41 (a)(1)(G) and 37 CFR 1.16(s).  Total Sheets Extra Sheets Number of each additional 50 or fraction thereof - 100 = 0 / 50 = 0 (round up to a whole number) x = 0  4. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity discount)  Other (e.g., late filling surcharge): Request for Continued Examination (RCE) \$810.00  Petition for Extension of Time 1,110.00  SUBMITTED BY  Signature Registration No. (Attorney/Agent) 33,829 Telephone (202) 496-7500				•					
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Non-English Specification, \$130 fee (no small entity discount)  Other (e.g., late filing surcharge): Request for Continued Examination (RCE) Petition for Extension of Time 1,110.00  SUBMITTED BY Signature Registration No. (Attorney/Agent) 33,829 (202) 496-7500							Fees Paid (\$)		
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SUBMITTED BY  Signature  Registration No. (Attorney/Agent) 33,829  (202) 496-7500	Other (e.g., late filing surcharge): Request for Continued Examination (RCE)						\$810.00		
Signature Registration No. (Attorney/Agent) 33,829 Telephone (202) 496-7500	Petition for Extension of Time						1,110.00		
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	Signature ////		1						
	Name (Print/Type) Matthew T. Ba	ailey	<del> </del>						